#### **Application Data Sheet**

#### **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: N/A

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: CHEMICAL-MECHANICAL POLISHING

(CMP) SLURRY AND METHOD OF

PLANARIZING COMPUTER MEMORY

**DISK SURFACES** 

Attorney Docket Number:: 28569/38510A

Request for Early Publication?:: No

Request for Non-Publication?:: No

Total Drawing Sheets:: None

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Mingming

Family Name:: Fang

City of Residence:: Naperville

State or Province of Residence:: IL

Country of Residence:: US

Street of mailing address:: 1543 Raymond Drive

City of mailing address::

Naperville

State or Province of mailing address:: IL

Postal or Zip Code of mailing address:: 60563

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Michael

Middle Name:: R.

Family Name:: Ianiro

City of Residence:: Macon

State or Province of Residence:: GA

Country of Residence:: US

Street of mailing address:: 242 Pebblebrook Lane

City of mailing address:: Macon

State or Province of mailing address:: GA

Postal or Zip Code of mailing address:: 31220

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Don

Family Name:: Eisenhour

City of Residence:: Grayslake

State or Province of Residence:: IL

Country of Residence:: US

Street of mailing address:: 142 Buckingham Drive

City of mailing address:: Grayslake

State or Province of mailing address:: IL

Postal or Zip Code of mailing address:: 60030

**Correspondence Information** 

Correspondence Customer Number:: 04743

# Representative Information

Representative Customer Number::

04743

# **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part	10/677433	10/02/03
	of		

# **Assignee Information**

Assignee name::

AMCOL INTERNATIONAL CORPORATION

Street of mailing address::

a Delaware corporation

One North Arlington; 1500 West Shure Drive

City of mailing address::

**Arlington Heights** 

State or Province of mailing address::

1

Postal or Zip Code of mailing address::

60004